

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

*See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.*

BR

PLAINTIFF		COURT CASE NUMBER						
James Worthem		07C6687						
DEFENDANT		TYPE OF PROCESS						
Hickerson		S/C						
SERVE		NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN						
		Tom Dart, Sheriff of Cook County						
		ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)						
AT		The Daley Center 50 W. Washington, Chicago, IL 60602 Room 704						
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:								
<input checked="" type="checkbox"/> JAMES Worthem # 2007-0071905 COOK County Jail P.O. Box 089002 Chicago, IL 60608								
<table border="1"> <tr> <td>Number of process to be served with this Form - 285</td> <td>1</td> </tr> <tr> <td>Number of parties to be served in this case</td> <td>6</td> </tr> <tr> <td>Check for service on U.S.A.</td> <td>0</td> </tr> </table>			Number of process to be served with this Form - 285	1	Number of parties to be served in this case	6	Check for service on U.S.A.	0
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Number of parties to be served in this case	6							
Check for service on U.S.A.	0							

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

FILED

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MAR X 3 2008 PH**Mar 3, 2008****MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT**

Signature of Attorney or other Originator requesting service on behalf of:		<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
		<input type="checkbox"/> DEFENDANT		02-11-08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only first USM 285 if more than one USM 285 is submitted)</i>	Total Process 3 of 6	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk	TD	Date 02-11-08
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) CAROL McFadden (Automation Clerk)	A person of suitable age and discretion then residing in the defendant's usual place of abode. <input type="checkbox"/>	
Address (complete only if different than shown above)	Date of Service 2/25/08	Time 1130 am
	Signature of U.S. Marshal or Deputy McFadden	

Service Fee 48.00	Total Mileage Charges (including enclosures) .48	Forwarding Fee 0	Total Charges 48.48	Advance Deposits 0	Amount owed to U.S. Marshal or Deputy 48.48	Amount of Refund 0
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REMARKS:

*1 ALS
1 HR
1 MTR*